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SMOG CHECK TECHNICIAN LICENSE #



Smog Check Technician Duplicate Wall License/Replacement Badge License Request Form

| duplicate wall | license requested in a single order are \$2.00 you are requesting a replacement badge license | nses or a replacement badge license. Each additional each. All orders will be sent to your address shown e, you must sign and return the certification below with |
|-----------------------|--|--|
| | First Duplicate Wall License Additional Duplicate Wall Licenses ? Replacement Badge License Wall and Badge License Package TOTAL | \$ 5.00 \$ 5.00 \$ 5.00 \$ 10.00 \$ |
| Name: _ Address: _ | | Make company check, cashier's check or money order payable to Experior. No personal checks or cash accepted. Send payment along with this form to: EXPERIOR |
| | Technician License #:E ne #: () | _ 1260 Energy Lane |
| To obtain | a form to request a duplicate Adjuster or Station lice | ense, see the BAR Web site, or call (800) 952-5210. |
| my smog check to | | f the State of California that I have lost or destroyed g check technician badge license in my possession. |
| PRINT NAME SIGNATURE | | DATE |